



Long-Term Care Continuous Quality Improvement

Annual CQI Report
2023-2024

Purpose

This report provides a foundational summary of the quality improvement activities for The Regional Municipality of York's Long-Term Care Homes in 2023-2024. It includes an overview of ongoing commitment to quality in our municipal structure, outlines key objectives in our quality improvement framework, identifies planning and priority setting processes, and reflects upon recent achievements and future commitments. This document is required by Ontario Regulation 246/22, s.168, under the *Fixing Long Term Care Act, 2021*.

Background

York Region operates two long-term care homes

York Region offers a range of programs and services to more than 1.2 million residents and many visitors, including operating two Long-Term Care Homes. Maple Health Centre is a 100-bed long-term care home located in the City of Vaughan. Newmarket Health Centre is a 132-bed long-term care home located in the Town of Newmarket. Both Homes serve resident populations with complex conditions, functional limitations and diverse medical needs. The homes offer a variety of bed types including short stay (respite) and convalescent care.

As part of a regional municipality, the homes' Continuous Quality Improvement (CQI) Plan sits within a broader framework of strategic plans

All programs and services offered by York Region are guided by the Region's corporate vision statement, "At York Region, we envision strong, caring, safe communities through our mission of working together to serve our thriving communities – today and tomorrow by relying on our values of Integrity, Commitment, Accountability, Respect and Excellence".

The Region's [2023 to 2027 Strategic Plan: From Vision to Results](#), provides an action plan with specific, measurable, achievable and time-based objectives for the Region's priorities with the current term of Council. The priorities are captured in four strategic priority areas:



**ECONOMIC
VITALITY**



**HEALTHY
COMMUNITIES**



**SUSTAINABLE
ENVIRONMENT**



**GOOD
GOVERNMENT**

Each of the priority areas are divided into objectives, activities and performance measures all of which are monitored and reported to Council to ensure accountability.



Similarly, Departments have their own plans outlining priorities to support York Region objectives. The Community and Health Services' department is guided by the 2023 to 2027 Integrated Human Services Plan (IHSP) with specific objectives, actions, milestones and target results:



Branches within Community and Health Services have aligned objectives, activities and performance measures to promote common goals. Paramedic and Seniors Services Branch, which operates York Region's two Long-Term Care Homes, develops a Roadmap based on comprehensive staff engagement processes which aligns with the Corporate Strategic Plan and the IHSP to integrate our collective work. York Region's Long-Term Care Homes' operational work plans are aligned to the corporate and departmental plans and results are reported through progress reports, milestone scorecards, dashboards and employee performance results. Regional Council is the committee of management for our two Homes and Long-Term Care Management keeps the committee of management updated on the performance of the homes.



Guiding Principles for our Continuous Quality Improvement Plans

We aim to deliver the highest quality of care for our residents every day

Everyone plays a role in quality. We are committed to delivering the best outcomes across all six dimensions of quality care.

Figure 1: Six Dimensions of Quality Care.



Adapted from Committee on Quality of Health Care in America. *Crossing the Quality Chasm, A New Health System for the 21st Century*. Washington, DC: National Academy press. 2001 and commonly referenced by Ontario Health and the Institute of Healthcare Improvement.

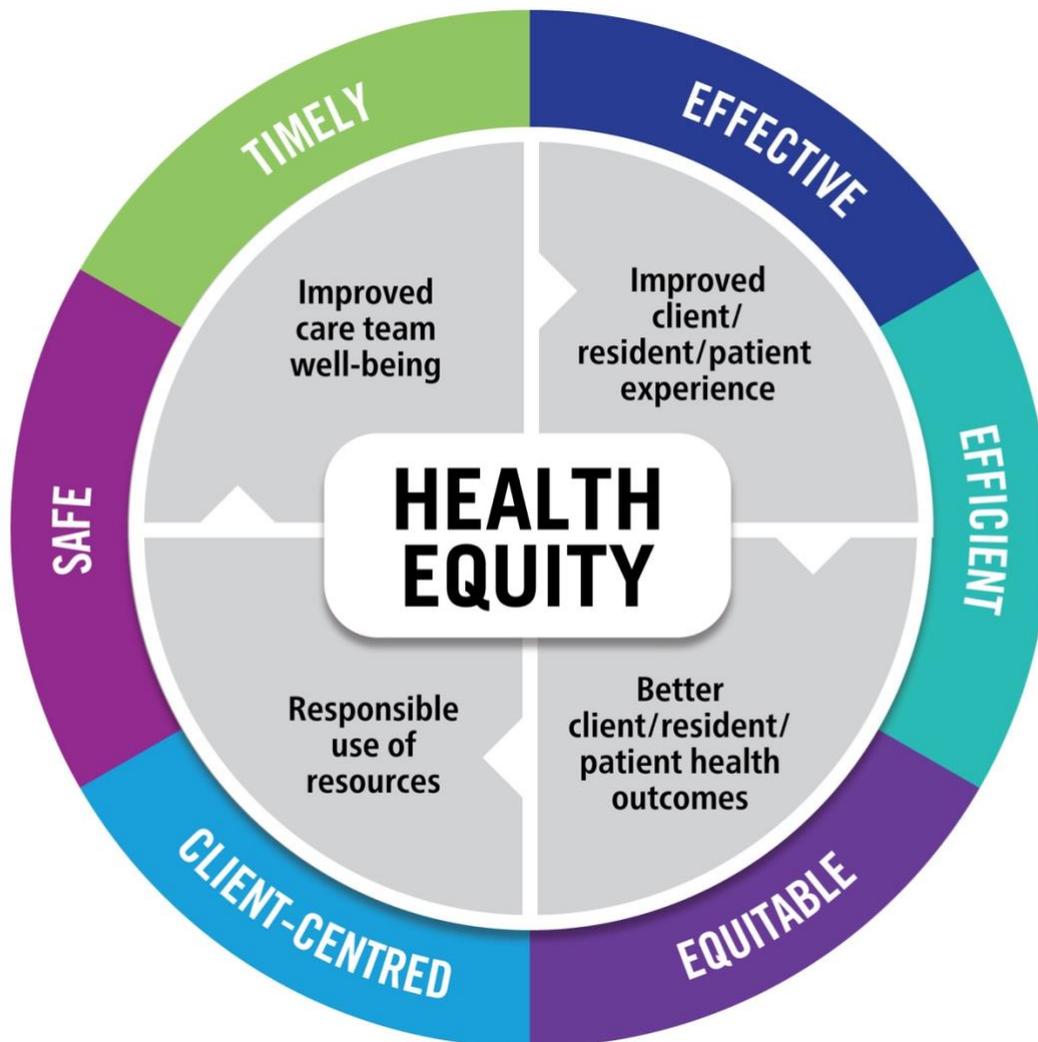
The six dimensions of quality care shown in Figure 1 reflect the four priority areas shown in Figure 2 below:

- Improved resident experience
- Better resident outcomes
- Responsible use of resources
- Improved care team well-being

These priority areas guide our work, with clear links to Regional, departmental, branch, and program ambitions, goals, and priorities.

Figure 2: Priority Areas for CQI aligned with Quality Dimensions

The six dimensions of quality are interwoven with the four priority areas for CQI and both place health equity as a central feature. The most impactful, engaging and motivating improvement activities fit with all four priority areas and multiple dimensions, supporting selection of improvement activities.



Adapted from Sikka R, Morath JM, Leape L. The Quadruple Aim: care, health, cost and meaning in work. *BMJ Quality & Safety* 2015;24:608-610 and commonly referenced by Ontario Health and Institute of Healthcare Improvement.

Our Continuous Quality Improvement Journey

York Region's Maple Health Centre and Newmarket Health Centre boast a long-standing history of continuous quality improvement

We are proud of our teams' dedication to improvement using the four priority areas and six dimensions in selecting meaningful objectives for quality improvement. We consistently participate in:

- Annual Quality Improvement Planning with setting incremental performance improvement targets associated with change plans, process, and outcome measures
- Annual Program Evaluations that contain annual improvement targets and activities and milestones to achieve the targets
- Annual resident and family/caregiver experience surveys that inform future plans with targeted improvements

- Quarterly reviews of Canadian Institute of Health Information data trends for key long-term care home indicators and benchmarking against peers to inform improvement action plans
- Collaborative, inter-disciplinary committee and working group structures to support data sharing, development of innovative ideas for improvements, monitoring progress and celebrating successes
- Accreditation cycles requiring evidence of the commitment to continually improve services and encourage feedback through the Commission on Accreditation of Rehabilitation Facilities (CARF)
- Partnering with peer organizations to identify, understand, design, deliver on quality improvement initiatives designed for local transformation of care (for instance, Behavioural Supports Ontario, Public Health and Infection Prevention and Control Hubs)
- Uniting with local Ontario Health Teams (OHT) in reimagining a new way of organizing and delivering care that is more connecting to individuals in local communities including the Southlake Community OHT, Eastern York Region and North Durham OHT and Western York Region OHT
- Benchmarking and sharing evidence-based and prevailing practices with peer municipalities
- Participating in regular functional meetings to communicate and exchange ideas as well as gather feedback on initiatives

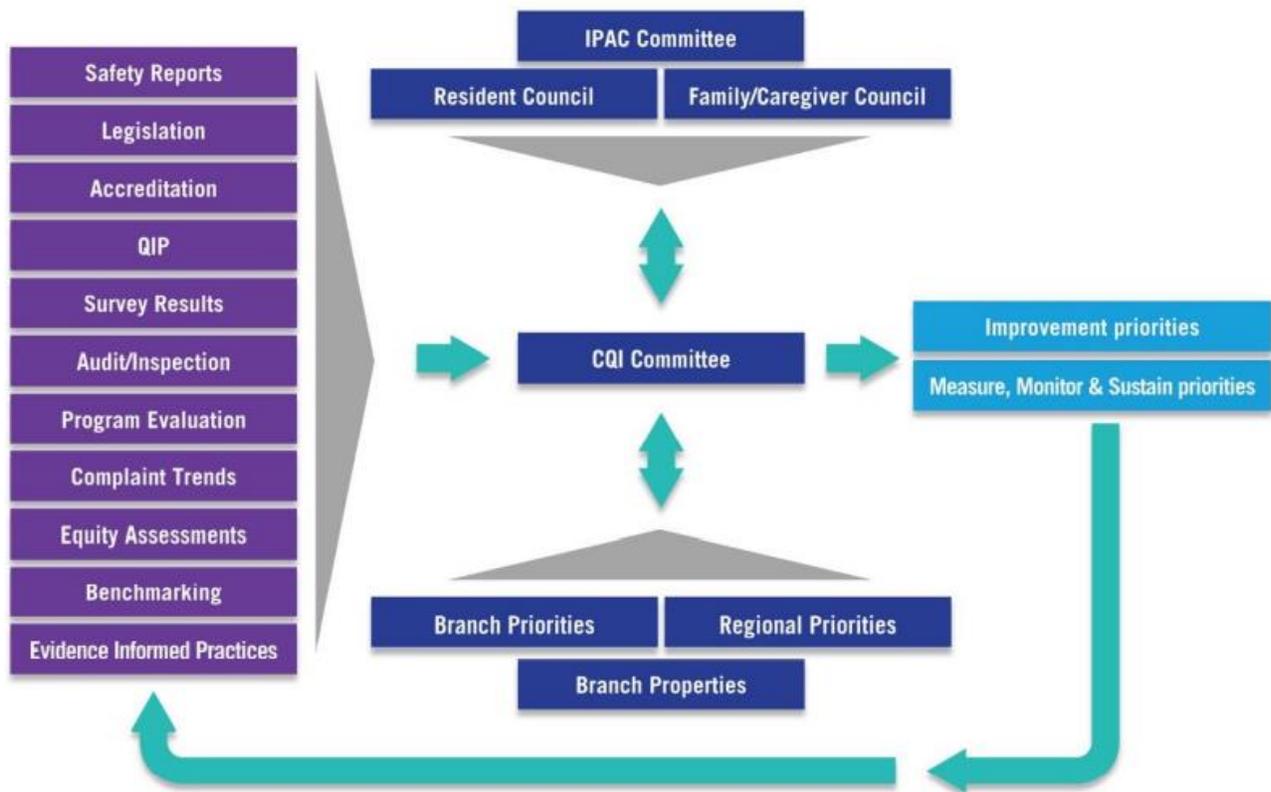
Collaboration is key to monitoring performance indicators and trends and identifying quality improvement priorities

In April 2022 and 2023, the Ministry of Long-Term Care implemented legislative and regulatory changes intended to transform the organization and delivery of care in long-term care homes across Ontario. York Region's Maple Health Centre and Newmarket Health Centre have formed a Steering Committee and working groups to respond to and integrate these changes as one, coordinated team.

In July 2022, York Region's Long-Term Care Homes launched their Continuous Quality Improvement (CQI) Committee. The CQI Committee is a collaborative, multidisciplinary committee that monitors and measures progress on quality issues, residents' quality of life, and the overall quality of care and services provided in the long-term care home, with reference to appropriate data. The committee involves participants from the Homes' leadership team, Medical Director, Continuous Quality Improvement team members, pharmacy partners, physiotherapy partners, Family Council and Resident Council members, People, Equity and Culture team members, nurses, personal support workers and a range of other key contributors. It considers, identifies, and makes recommendations to the licensee regarding priority areas for quality improvement in the homes and coordinates and supports the implementation of the continuous quality improvement initiatives among other functions.

This committee is vital in our processes to identify quality improvement priorities (see Figure 3). Figure 3 represents our process to develop CQI priorities in an ongoing cycle with multiple inputs and influencing and shaping factors and forums. It is an iterative process with multiple touchpoints of engagement with various stakeholders designed to ensure we are nimble in responding to emerging trends.

Figure 3: Process to Determine CQI Priorities for each Long-Term Care Home



The Homes have processes in place to measure quality through monitoring performance indicators and analysing trends identified in dashboards and scorecards. These tools help to identify areas that need more focussed attention and help to measure impact when changes are introduced.

Resident Experience Survey influencing our Improvement Focuses

The annual Resident Experience Survey 2022 has shaped our improvement commitments for 2023

In alignment with *Fixing Long Term Care Act, 2021* section 43, York Region conducts annual Resident Experience Surveys to elicit feedback from our residents to enable continuous quality improvement activities.

Our 2021 Resident Experience Survey results analyses revealed overall satisfaction with the accommodation, care, services, programs and goods provided to our residents. It also identified key areas in each Home where improvement efforts should be focused to enhance our resident experience.

Long-Term Care Home	Focus of Improvement	Action Item	Implementation Status (date)	Outcome in 2022 Survey
Maple Health Centre	Increase awareness of Family Council by 20%	Refresh Family Council	Complete (August 2022)	Moderately effective – improved 14%
		Use communication strategies to promote Family Council in the home	Complete (October 2022)	
		Use additional communication medium to promote Family Council (newsletters, emails, etc.)	Underway (January 2023)	
	Improve performance in ‘opportunities to make decisions in my care’ question by implementing three activities	Resident/family members issued a draft of the care plan one week prior to care conference for review, reflection, and input to enhance opportunities for influence	Complete (July 2022)	Moderately effective – improved 1%
		Introduce a new strategy to enhance communications among team, resident and families through quarterly nursing leadership touchpoints with residents or substitute decision makers	Complete (June 2022)	
		Reinforce concepts of resident-centred language through education for all staff leveraging checklists and other available resources	Complete (October 2022)	
	Increase resident input opportunities for recreational and social activities with three activities	Planning for resumption of spiritual services and recreational activities that were reduced through intensive pandemic period(s)	Complete (June 2022)	Effective – improved 39%
		Establish program planning meetings with residents on the first of each month; posted in each resident’s room and in home area	Complete (October 2022)	
		Communicate the above broadly and for emphasis – Resident and Family Council, newsletters	Complete (October 2022)	
		Exploring new tool for monitoring participation/engagement in recreation and social activities	Postponed due to feasibility and privacy	

Long-Term Care Home	Focus of Improvement	Action Item	Implementation Status (date)	Outcome in 2022 Survey
Newmarket Health Centre	Increase awareness of Family Council to 77%	Refresh Family Council	Complete (August 2022)	Ineffective – worsened 6%
		Use communication strategies to promote Family Council in the home	Underway (January 2023)	
		Use additional communication medium to promote Family Council (newsletters, emails, etc.)	Underway (January 2023)	
	Improve resident experiences with contracted services (hair dressing, physiotherapy, podiatry) with two activities	Explore opportunities with contractors to enhance resident experience	Complete (May 2022)	Effective – improved 11-20% except dentistry
		Update residents/family members about actions and status taken to address survey feedback regarding contracted services	Underway (January 2023)	
	Increase resident input opportunities for recreational and social activities with three strategies	Establish program planning meetings with residents on the first of each month; posted in each resident's room and in home area	Complete (October 2022)	Effective – improved 8%
		Communicate the above broadly and for emphasis – Resident and Family Council, newsletters	Underway (January 2023)	
		Exploring new tool for monitoring participation/engagement in recreation and social activities	Postponed due to feasibility and privacy assessments	

Our 2022 Resident Experience Survey was deployed in mid-November in paper and electronic formats and translated into languages of preference to optimize participation. Responses were welcomed until December 31, 2022, at which time data was compiled and analyzed.

The results were analysed and communicated to the Homes' leadership, residents and their families, Residents Council, Family Council and staff members of the Homes in April through June 2023 in visual, digital, print and face to face communications.

Strengthening our CQI Program with a Renewed Focus and Additional Resources

The Homes have achieved several CQI successes between April 1, 2022 and March 31, 2023

In the 2022-2023 fiscal year, we have continued to build upon our culture of continuous improvement at Maple Health Centre and Newmarket Health Centre. The achievements listed below position the Homes to make progress on the four priority areas

- Expanded our Continuous Quality Improvement and Compliance team of change and improvement professionals, to support and guide high priority initiatives to improve quality, safety and systems in Paramedic and Seniors Services
- Engaged a broad range of stakeholders launching our re-imagined Continuous Quality Improvement Framework. This framework is supported by a toolkit complete with resources to define and design improvement initiatives, test small changes, implement improvement projects, monitor data and sustain improvements
- Fortified our Infection Prevention and Control (IPAC) programs in the homes by recruiting and onboarding IPAC practitioners, supporting their professional development and partnering with local (IPAC) Hub Teams and Communities of Practice
- Reinvigorated our IPAC Committee and developed terms of reference, work plans, dashboards and scorecards
- Developed a balanced scorecard to align with our priority areas to support comparison of performance with desired targets and prioritized opportunities for improvement
- Prepared to participate in a reaccreditation survey in May 2023 with self-evaluations of our processes and practices. The onsite survey is the culmination of quality improvement activity against international standards designed to ensure satisfaction for stakeholders, organizational efficiency and optimal outcomes for the people we serve
- Welcomed resident members' participation on key organizational Committees including the Continuous Quality Improvement Committee and Infection Prevention and Control Committee. We continue efforts to recruit Family and Caregivers to actively participate in our Committee structures
- In April 2022, the Ministry of Long-Term Care released Inspection Guidelines to align with the legislative changes. A cross walk conducted between the former Inspection Protocols and new Inspection Guidelines enabled us to develop proactive audit tools. The tools will be trialed and revised in our proactive inspection processes as part of our program evaluations
- Newmarket Health Centre and Maple Health Centre focussed improvement efforts on reducing the percentage of residents with worsened pain with four change ideas. We are excited to share that data indicates that the change ideas have led to improved outcomes for residents

The CQI Committee works closely with Communications staff to celebrate successes, share opportunities for improvement and highlight improvement initiatives are highlighted internally and externally.

Staff wellbeing is a priority of the CQI program

A healthy and resilient workforce is essential for maintaining a robust CQI culture. In alignment with our priority area for improved care team wellbeing, we have cascaded the successes from York Region's Corporate Equity, Diversity and Inclusion (EDI) Committee and the [Inclusion Charter for York Region](#), with the Paramedic and Seniors Services Branch launching an EDI Committee in Fall of 2021, that included members from our Homes. The Homes are committed to creating a welcoming and inclusive environment that recognizes and celebrates all dimensions of diversity among those we serve and our teams. Learning about each other is foundational to our commitment to inclusion. In the spirit of continued learning and celebrating diversity, the EDI committee held a series of workshops to define

their role and responsibility, raise awareness and develop a path forward. This work has been successful in creating awareness of EDI and developing allies to strengthen the EDI culture within our Homes.

We would be remiss if we did not acknowledge the teams in our Homes and their response to the COVID-19 pandemic. The safety and wellbeing of our residents, staff, families and essential caregivers is paramount. The sequential waves of infection locally presented a unique circumstance with most residents vaccinated and staff protected with vaccines and personal protective equipment. We adjusted protective measures to maintain a safe environment for our residents and staff while supporting physical, emotional, cognitive and spiritual engagement. Community transmission was significant, and this was particularly impactful for staff members. We are thankful for the entire team’s cooperation and dedication to providing stable and predictable care in a challenging time. We are involved in an After-Action Review to identify strengths to be maintained and built upon and identify areas for improvement in partnership with our Strategic Engagement and Emergency Management Team.

We are involved in a multi-phased Seniors Services Transformation Plan designed to strengthen the structure and staffing in our Homes, develop leadership, enhance our culture and wellbeing and encourage continuous learning.

Looking Ahead: Priorities for April 2023 -March 2024

York Region is committed to a variety of continuous quality improvement initiatives to continue supporting and building a culture of quality and safety in the Homes, including, but not limited to:

- Setting specific objectives for each of the four priority areas against which progress can be measured
- Evolving performance measures dashboards and scorecards to integrate our quality monitoring activities and data-based decision making. New electronic dashboards and scorecards will be designed to be easily interpreted by a variety of stakeholders involved in our CQI Committee while uncovering data driven performance insights
- Participating in a reaccreditation survey in May 2023 with self-evaluations of our practices to underscore our commitment to ongoing quality improvement
- The CQI Committee has recommended the following for improvement:

Quality Dimension	Maple Health Centre	Newmarket Health Centre
Better Resident Health Outcome (Quality Improvement Plan)	<ul style="list-style-type: none"> • Reduction of falls • Reduction of infections 	<ul style="list-style-type: none"> • Reduction in antipsychotic use without a relevant diagnosis • Reduction of infections
	<ul style="list-style-type: none"> • Formalize the Restorative Care Program 	
Better Resident Experience	Increase positive responses about: <ul style="list-style-type: none"> • Variety of intellectual activities offered by 10% • Variety of spiritual/religious activities offered by 3% 	Increase positive responses about: <ul style="list-style-type: none"> • Variety of intellectual activities offered by 2% • Variety in the menu by 9% • Flexibility about my preferences and routines

	<ul style="list-style-type: none"> Variety of menu items offered by 3% <p>Eliminate negative responses about:</p> <ul style="list-style-type: none"> Respecting the dignity and rights of residents by closing curtains and bathroom doors Contracted service providers to enhance our resident experiences <p>Maintain 0% negative responses about:</p> <ul style="list-style-type: none"> Being given the opportunity to make decisions about their care needs 	<p>for when to take a bath by 9%</p> <ul style="list-style-type: none"> Respecting resident belongings by 4% Being given the opportunity to make decisions about their future care needs by 3%
	Refresh our palliative care programs with renewed philosophy of care	
Improved Care Team Wellbeing	Developing and implementing a main schedule with permanent, full-time positions in alignment with 2023 budget approval	
Responsible Use of Resources	Evolve program workbooks to support clearly defined priorities, goals and measurements through use of central location to collaboratively monitor data and identify trends for integration of quality planning, improvement and compliance.	

The actions listed above will help to strengthen the Homes’ culture of quality and safety, in alignment with York Region’s vision for strong, caring and safe communities, and corporate and departmental priorities for healthy communities.

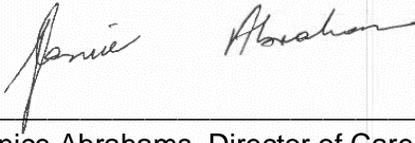
CONCLUSION

York Region’s Long-Term Care Homes maintain their commitment to continuous quality improvement with enthusiasm in 2023. This inaugural report provides an opportunity to share our quality improvement objectives, reflect on the achievements and successes and highlight our commitments for this fiscal year.

Sincerely,



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